

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	AUTOMATIC RANGE UP-SHIFT CONTROL AND METHOD OF OPERATION
Attorney Docket Number::	65856-0052
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	6
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Alan
Middle Name::	C.
Family Name::	Stine
City of Residence::	Kalamazoo
State or Province of Residence::	MI
Country of Residence::	US
Street of mailing address::	5071 Foxcroft
City of mailing address::	Kalamazoo
State or Province of mailing address::	MI

Postal or Zip Code of mailing address:: 49009

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Michael

Middle Name:: E.

Family Name:: Lemon

City of Residence:: Battle Creek

State or Province of Residence:: MI

Country of Residence:: US

Street of mailing address:: 174 Pensacola

City of mailing address:: Battle Creek

State or Province of mailing address:: MI

Postal or Zip Code of mailing address:: 49017

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: David

Middle Name:: L.

Family Name:: Wadas

City of Residence:: Kalamazoo

State or Province of Residence:: MI

Country of Residence:: US

Street of mailing address:: 6300 Willowbrook Drive

City of mailing address:: Kalamazoo

State or Province of mailing address:: MI

Postal or Zip Code of mailing address:: 49048

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name::	Yeidei
Family Name::	Wang
City of Residence::	Kalamazoo
State or Province of Residence::	MI
Country of Residence::	US
Street of mailing address::	1240 Lakeway Avenue
City of mailing address::	Kalamazoo
State or Province of mailing address::	MI
Postal or Zip Code of mailing address::	49001

Correspondence Information

Correspondence Customer Number::	10291
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Representative Information

Representative Customer Number::	10291
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